Telephone interview with Dr. Raymond Osborne, Jr., battalion surgeon with the Marine FLC (Force Logistics Command) near Danang, 1970. Conducted by Jan K. Herman, Historian of the Navy Medical Department, 1 June 2005.

Where are you from originally?

I was born in New York City and grew up in Bergen County, NJ.

Did you go to school in New Jersey?

I went to college at the University of Pennsylvania and took my medical training at McGill in Montreal.

When did you graduate from there?

In '66.

How did you get involved with the Navy?

It's an interesting story. I had a Berry Plan deferment for orthopedic surgery with the Navy. I was going to be an orthopedic surgeon but things didn't work out. I took a surgical internship, then a year of surgical residency at Duke, and half a year of orthopedic training after that. Then I decided I didn't want to go through with it. So I sort of had a half a surgical career but it wasn't really enough to qualify me as a surgeon.

By that time, the Vietnam War was in full progress and I knew that the Navy had me. So I took a trip down to BUMED to review my options since I didn't have the Berry Plan deferment anymore. There was a doctor draft on at the time. The person I spoke to at BUMED, said, "Well, we can offer you several things. First we can offer you flight surgeon training at Pensacola."

I said, "That sounds good."

"Or we can send you to Thule, Greenland."

I said, "No, I don't think I want to do that."

"Or we could send you to submariner's school."

I said, "No, I don't think I want to do that."

"Or," he said, "We can put you out on a destroyer out in the Pacific."

I said, "No, I don't think I want to do that."

"Or we could send you to Vietnam."

I said, "I don't think I want to do that."

"Well, let's put you down for flight surgeon training in Pensacola and, meanwhile, we're going to have you as a 'rooster'--a general medical officer at St. Albans Hospital waiting for orders to come through."

So, I was in St. Albans for about 3 months, and one bright May morning the CO called me and said, "Well, congratulations, we have orders here to send you to flight surgery training at Pensacola, FL."

And I said, "Great."

And then an hour later, the phone rang and it was the CO again. He said, "Got bad news for you. We've got another set of orders here to send you to Vietnam."

I said, "Well, the Pensacola orders came through first."

"It doesn't matter," he said. "Vietnam takes precedence."

You got snookered.

So, off I went to Vietnam. And I was not entirely happy about it but I was doing what I had to do. I was assigned to a battalion aid station looking after Marines in the Fleet Marine Force FLC, Force Logistics Command near Danang. I was there for a year. Also, as I mentioned in the letter, we also had a Vietnamese civilian children's hospital so I got to look after the kids. And it really turned out to be a wonderful year, which I hadn't been expecting at all.

Did you have any preparation for going to Vietnam?

Oh, yes. I went to Field Medical Service School at Camp Lejeune in Jacksonville, NC, for 3 weeks. And I was issued literature about medevac training, about evacuating people out of country, treating battlefield injuries, and that sort of thing.

I was a battalion surgeon. I wasn't a surgeon at one of the major hospitals in Vietnam--1st Marine Division or 3rd Marine Division. They had larger hospitals with trained surgeons working in the operating room. I was basically a medical triage officer. My main job was taking sick call for the Marines.

So your duties when you got to the FLC was at Red Beach.

Red Beach, north of Danang. In 1970, the Danang area was about the size of Newark. It was huge. There were American military installations, one next to another, over a 50- or 60-mile radius. But I was north of Danang.

Do you remember your arrival in Vietnam?

Oh, yes. We flew in on big civilian airliners to Okinawa where we stayed for 2 or 3 days. Then we got on a C-130 and landed at Danang Air Force Base. It was hot as blazes. I heard the rat- a-tat of small arms fire, looked around, and saw a lot of Vietnamese people wearing American military fatigues. And I wondered what I'd come to and whether or not I was going to get out in one piece. But, yes, it was interesting.

When was that?

July of '69.

And you reported directly to your new assignment. Did you know where that assignment was going to be before you got there?

Yes, I did. The orders were cut. I was replacing another battalion surgeon who had finished his rotation so I was coming in to take his slot. I knew where I was going and where I was assigned. But, of course, I'd never been there and I didn't know any of the officers that I was working with.

When you got to the hospital, what did you see?

It was big and it was full of kids of all ages--Vietnamese children from infants to young adults. I'd say about a third of them were injuries from the war and about two-thirds of them were illness. There were all kinds of strange tropical conditions I'd never seen before--parasitic illnesses and strange bacterial illnesses that I'd only read about in small type in medical books but never had a chance to treat. Most of them responded--at least the ones who were in better shape--very well to minimal treatment.

Organizationally, how did that hospital run? How did you fit into the chain of command?

A Navy commander was in charge. He was the senior person. All the people there were Navy and I had five or six other Navy physicians who were at my level and we all worked together.

So you reported to this commander.

Yes. He was a physician like I was so it wasn't like he was the old man and running a tight ship. It was very collegial. Everyone worked together, took turns, and things worked out very well.

You were assigned to the FLC to take care of the American personnel. So then the hospital was an additional duty?

This was like a collateral duty. The whole reason I was over there was to provide medical service to American service personnel. I wasn't over there to care for the Vietnamese specifically. But the hospital just happened to be in the compound and so we looked after it as well.

You had mentioned that the Seabees had actually constructed this hospital.

Yes. It was made out of stone with a big main ward and several wings off that. It had a tile roof and a cement floor. It contained a lot of hospital beds and equipment donated by charitable organizations. Actually, it was an attractive facility. It was one-story. I have an aerial view of it here. It says, "Aerial view of the Hoa Kanh Children's Hospital. A simple, functional design. Facility valued at $300,000. Was constructed by South Vietnamese craftsmen under the guidance of US Navy Seabees and Marines."

And, I understand, a lot of the nursing staff was provided by the Vietnamese.

They were all Vietnamese, and the chief nurse was a woman who had escaped from Hanoi and was really dedicated to her job. She basically trained all the other nurses single-handed in looking out for patients, what to watch for, how to take care of them, and what the doctors wanted. It worked very well. She would hire and fire local girls who would come from the local Danang area and she interviewed them personally. She knew what she was looking for: Who would make a good nurse and who wouldn't.

She had been trained as a nurse in Hanoi?

Right.

You say that the hospital was located on Red Beach, or what was near Red Beach.

Red Beach was a technical term. There was a beach several miles away. They called it Red Beach but there really wasn't any beach around. It was just countryside--flat and sandy.

So you weren't really near the ocean.

The ocean was a couple of miles away.

I understand you also went on MEDCAPs from time to time.

Right.

Was that a frequent occurrence.

It was not all that frequent. It was more frequent in the beginning of my rotation than it was toward the end. There was some question as to how effective those missions were. But even if we didn't heal a lot of people by going out and dispensing medications in the villages, psychologically it helped to impress the people positively that we were there to help them.

And you said you thought this might have some bearing on the fact that although you witnessed attacks in the area, the hospital was fairly safe from attack.

That's right. We didn't know which side the children in the hospital belonged to, but we always knew that some of them were members of families that supported the Viet Cong. Nobody knew who was who. The Vietnamese were all very much afraid because they had no idea who might betray them. But they were all pretty convinced that if a takeover by the North should occur, they'd all have their heads cut off because they had sided or worked with the Americans.

There was a Viet Cong attack using an antipersonnel mine in a local theater. You didn't witness the attack but you certainly witnessed the aftermath.

Exactly. We had a number of kids come into the hospital who had shrapnel wounds. The more severely injured ones were probably medevaced out to the 1st Marine Division hospital but we treated some of the lesser injuries. We had a fair number of kids come in and we got the story from the nurses because they would talk to the children and get the story from them.

As I understand, it was mainly a children's hospital, but did you see some adults?

We saw children up to the age of 17 or 18. After that, they were taken care of in other places.

About that famous photograph of you in the Hoa Kanh Hospital, the copy we have in our archives has a caption. It says that the patient you're both looking at was the victim of a truck accident.

Yes. We had a lot of those as well. It probably doesn't take a lot of imagination to conceive of the main road from Danang. It was choked with trucks, automobiles, motorcycles, mopeds, and animal-drawn carts. And there was absolutely no sense of who has the right of way, or which side the traffic was supposed to move on. There were a lot of Vietnamese who drove motorcycles or mopeds who would go weaving in and out of all this traffic at a hair-raising rate of speed. Whenever you had an intersection or a turn, it was every man for himself. So you can imagine, there was a lot of vehicular trauma. And we saw a fair amount of it at the hospital.

Do you have any particular recollections of that photograph?

No. Not that particular one. I could recognize Gwen and myself but I don't remember the particular patient.

The caption, as I recall, said that you had just made a diagnosis on the patient who had been involved in a vehicular accident. And Gwen is looking very concerned because you have told her that, unfortunately, his leg would have to be amputated.

Really?

Yes. That's how the caption reads. It says that the nurse is looking so concerned because she realizes the patient is going to lose a limb. And that's why you look so concerned. There's drama in that photo, for sure.

No. I don't remember that. I don't have that particular photo in my album.

Do you remember any other particular patients?

I remember one who wound up having appendicitis. And I was very proud of myself because I was able to diagnose it. I could manage some Vietnamese talking to the children but not enough to carry on a fluid conversation, but enough to do a medical exam. There was one child who was complaining of pain in the right lower quadrant of the abdomen. It was tender when I poked him so I was concerned that he might have appendicitis. I suggested that he be sent off to the regional hospital. He came back about a week later, and it turns out that he had had an appendix that had ruptured. So I saved his life and was very pleased about that.

A lot of the surgery, then, did not take place at that hospital but elsewhere.

We did some minor surgery. We could do tracheostomies, for instance, if we had to, but we couldn't do major operations there.

In your letter, you said that right around the time of the terrorist attack in the theater, there were some reporters in town. You said you wanted them to focus their attention on the terrorist acts and make the American public aware of these tactics. But you said they didn't seem to be interested.

Exactly. I was also hearing from the Vietnamese people I worked with about their worries and concerns and their fears about the Viet Cong and the North Vietnamese taking over. And what would happen to them should that occur. The Marines would also talk among themselves about the enemy. For instance, the Viet Cong would attack at night. They'd be wearing black pajamas and they'd try to cut the wire and infiltrate the camp. They would also fire RPGs and mortars over into the camp. They attacked one night and there was a fire fight. The next morning when the sun came up, the Marines found the bodies of several Viet Cong who had been killed attempting to cut the wire and enter the camp. One of them was the camp barber who everyone had known for years. He cut everybody's hair. Then one of the Marines told me that if I saw one of the Vietnamese base workers pacing outside the wire, to shoot him. I asked why. He said, "Because he's measuring where to set up a mortar in order to hit the camp. And that's the reason he's pacing."

I sort of did a double-take when I heard all this stuff but this is part of the lore of Vietnam. I'd hear these intermittent stories about attacks. And we had several attacks on the base while I was there.

So I wasn't too surprised when I heard about the attack in a movie theater. But I really had the feeling reading the papers that with all the anti-war activity going on in the United States, that people simply had no concept of what it was we were engaged in. I saw a disconnect between what I read in the papers and what I could see all around me being in Vietnam. I thought that someone ought to get the other side of the story. I was hoping I could get a reporter and tell him what my experience had been. I was shocked when he was absolutely uninterested.

How long were you in Vietnam?

For a year. I left in July of 1970. Things were kind of winding down at that point. They had had the big siege at Khe Sanh the year before I got in country. They weren't pursuing patrols and going out into the bush to engage the enemy quite as actively as they had been a year or two before. So casualty rates weren't as high amongst American soldiers, and we weren't pursuing as aggressive a policy.

But you were certainly seeing plenty of children in that hospital.

Sure. And, another thing. Marines would go out on patrols from time to time, sometimes at night. One of the chiefs, who was attached to our outfit, was hot to go out on one of these night patrols so he could see some action. He asked me if I was interested in coming along. And I said, "No thanks. I think I'll just stay where I am."

You left Vietnam in 1970. Do you recall your leave taking?

When the time came for me to leave, I had a choice of taking a military MACV flight across the Pacific and back to Travis. But I was unmarried at the time. I thought that since I was already on the other side of the world and Uncle Sam's paying, I might as well go around the other way. So I took a long trip around and went to Bangkok, Singapore, Dacca, Delhi, Tehran, Greece, then to the Netherlands, and then back home. I got to see a part of the world I might never have gotten to see.

What was your next assignment when you got back to the States?

Actually, the way the military works, I had several colleagues who were there under duress. One I remember very specifically. He wasn't with me in Vietnam but with me in Field Medical Service School. He was going somewhere in Vietnam. He was from Brooklyn and was an anti-war protester. He thought it was an immoral war, that Americans shouldn't be in it, and didn't want any part of it. But he was caught because he was a doctor and there was a doctor draft on. In addition, most of the guys who were with me in Vietnam had families--wives and children waiting for them-- so they wanted to get back home and be done with their commitment.

I was actually enjoying the time I spent in the service so I applied for a Navy residency. I thought at that time I wanted to go into dermatology or maybe radiology. In 1970 they started reducing strength. People got RIFd (reduction in force). The RIF notices came out pretty indiscriminately. So since I wanted to stay with the Navy, I got a RIF notice and the guy who wanted to get out had to stay.

It makes perfect sense. That's the Navy.

So I got RIFd and got out. But I stayed in the reserves another year. I got a residency at Yale-New Haven Hospital. I'd go to Navy duty with my uniform on and people would shout at me from across the street. Yale students and faculty would also be disrespectful. I got a lot of adverse notice because I was wearing a Navy uniform. I thought, "This was crazy." It was culture shock coming to Yale-New Haven Hospital from having been in Vietnam. I had gone from a military environment where people generally were favorably disposed toward what America was trying to do in Vietnam to a Yale University environment where there was anti-war hysteria everywhere.

So you probably reached a point where you didn't want to wear a uniform anymore.

Well, I wore it for a year but stopped doing Navy reserves because I was busy with the residency. I only had 4 weeks vacation a year, and I had to use two of those for active duty for training. I really couldn't see doing that for another 10 or 15 years until I was ready for retirement. Maybe I made the wrong choice; I don't know.

Once you were separated from the Navy, what did you do?

I pursued my radiology career. I'm retired now but was in private radiology practice up until 1999. I had done my residency in New Haven, then I went down to Durham, NC, and was on staff down there for 2 ½ years. Then I was at Memorial Sloan-Kettering Cancer Center in New York, and Cornell New York Hospital for 2 years. I then went to Middlesex Hospital in Middletown, CT, as part of a group practice, a was there for about 20 years.

And you say you just retired in '99.

Yes.

So now that you're retired, what do you do with your time?

I enjoy myself. I swim. I walk. I read. I work on my postage stamp collection. I'm a member of the stamp club. I really enjoy having the day to myself.

It's been 35 years since you left Vietnam. Do you think about it much anymore?

I do. I think about it quite a bit. As you can probably tell from the tenor of some of my remarks, I'm both concerned that what America tries to do in the world gets misrepresented in the press, and how America is divided between red and blue. I think the media really plays a large role in creating this situation. And I don't understand how people who go into journalism--both television journalism and print journalism--all seem to have the same set of ideological blinders on. All seem to fly in the same direction but it's not representative of what a lot of American people feel. I don't understand how that self-selecting process works but somehow it seems to work consistently.

Do you ever think about the Vietnamese people you worked with, especially that nurse--Nurse Gwen--and some of the others. Do you think about them and what might have become of them?

Oh, absolutely. I wonder what happened to them. I lost touch with them and I haven't been back to Vietnam since. Maybe it would be a good idea to go because I know other people have done it. I worry about them because I don't know if they were able to get out of the country. Were they sent to reeducation camps? But I know from meeting a Vietnamese doctor over here who served with the ARVN when I was over there, that things were very hard for the Vietnamese after the communists took over. And I've heard stories about Vietnamese who were trained as physicians who are driving taxicabs in order to make enough money to live because they're paid very poorly by the communist administration.

I want to thank you for spending time with me this afternoon.

I hope I was able to be of some help.